During your surgery, your doctor placed a suprapubic catheter to help you empty your bladder. This flexible tube goes into the bladder through an opening in your lower abdomen. You may be instructed to go home with your catheter connected to a drainage bag or capped off.

If Your Catheter Is Connected to a Drainage Bag
There are two types of drainage bags: large and small. The large drainage bag is good to use at night. The small bag, called a leg bag, can be worn when you are up and walking or sitting in a chair. With both types of bags, there are some things you should know:

• Be sure the tubing to the drainage bag is below the level of your bladder. This is done so the urine does not drain back into your bladder, putting you at risk for infection.
• Keep the tubing free of kinks so the urine can flow easily.
• Empty your drainage bag when it is just over half full. Remember the smaller leg bag will need to be emptied more often than your larger bag. You should also empty the drainage bag when you go from one type of drainage bag to another.
• Use a container that has measure markings so you know how much urine you are passing. Keep track of how much urine you are passing and tell your doctor. Write down the date, time, and amount of urine each time you empty the bag.
• Note the color and smell of your urine. Healthy urine is clear or has a yellow color with a mild smell. A small amount of blood in the urine is common right after surgery. Call your doctor if the urine becomes cherry-colored or has clots. If the urine appears pink, rest and drink more fluids.
• Be sure to close the clamp on the drainage bag after you drain the urine.
• Change to a new drainage bag every month or if there is a leak in the tubing.
• You can clean your drainage bags as needed by using a mixture of vinegar and water:
  1. Mix one tablespoon of vinegar with 12 tablespoons of water.
  2. Pour the mixture in through the drain and swish it around in the bag.
  3. Drain the mixture from the bag and rinse with clean water.
  4. Dry the outside of the bag and tubing.
• Do not use a bleach solution on the bag or tubing because it can damage the bag.

If Your Catheter Is Capped Off and You Have a Foley Catheter
A Foley catheter is a flexible tube that drains urine from the bladder through the urethra. It is not connected to the suprapubic catheter. If you have a Foley catheter, you can leave the suprapubic catheter capped off as long as the Foley catheter is draining urine. If your Foley catheter stops draining and your abdomen feels full, then uncap the suprapubic catheter so it can drain, and call your health care team.

If Your Catheter Is Capped Off and You Do Not Have a Foley Catheter
Your doctor may have instructed you to check post-void residuals. This means to measure how much urine was left in your bladder after you tried to urinate normally.
Here is how to check the post-void residual:

1. Drink plenty of fluids to allow the bladder to fill. When you feel the urge to urinate, go to the bathroom and try to urinate as normally as possible. If you have trouble feeling when your bladder is full, urinate every three to four hours during the day. You may sleep through the night unless your full bladder wakes you.
2. Try to pass urine normally into a container.
3. Measure the amount of urine in the container.
4. Unclamp your catheter and drain it into the container.
5. Measure the amount of urine.
6. Clamp your catheter.
7. Write down the amount of urine you passed normally and the amount from your catheter on your record sheet. A sample table is shown here:

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Amount urinated</th>
<th>Amount from tube</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>2/24</td>
<td>10 a.m.</td>
<td>90</td>
<td>50</td>
<td>140</td>
</tr>
<tr>
<td></td>
<td>1 p.m.</td>
<td>100</td>
<td>80</td>
<td>180</td>
</tr>
</tbody>
</table>

Over time, the amount of urine from your catheter will decrease and the amount of urine you pass normally will increase.

**Caring for Your Suprapubic Catheter**

Change the dressing once a day by following the steps listed below. Change it again if the dressing falls off, becomes dirty, or gets wet.

1. Wash your hands with warm water and soap for at least 15 seconds. Rinse with water and towel dry.
2. Gather your supplies (all can be bought at your local pharmacy or grocery store):
   - Plastic trash bag
   - Cotton applicator (Q-tip or cotton ball)
   - Adhesive tape
   - Hydrogen peroxide
   - Split 4 x 4 gauze dressing or drain sponge
3. Take off the old dressing, being careful not to pull on the tube. Check the dressing for any unusual or foul drainage. Throw the old dressing away.
4. Wash your hands again.
5. Look carefully at where the tube leaves the skin (exit site). Check for any unusual or bad-smelling drainage, swelling, bleeding, redness, or skin irritation.
6. Wash around the site gently with soap and water. You may take a shower with the tube. It will not hurt it to get wet.
7. Apply hydrogen peroxide to the cotton applicator and use it to clean any crustiness around the catheter that does not come off with the soap and water. Start at the place where the tube comes out of the skin and clean outward three to four inches in a circular motion. Never clean back towards the tube. Let the area dry.
8. Place the split 4 x 4 dressing around the tube. Tape it in place.
9. Secure the catheter to the skin with adhesive tape so it cannot be pulled off.

**Call your health care team if you experience any of the following:**

- Urine that is cloudy, red, or has a foul odor or clots
- A temperature of 101°F or higher
- Redness, pain, or pus-like drainage around tube
- Bladder pain or feeling of fullness
- Urine leaking around the tube or no urine drainage
- The catheter falls out

Clinic phone number: __________________________